# Maximizing Medicaid Funding for Youth Served through the Comprehensive Services Act

Ways to improve utilization of Medicaid services and maximize Medicaid funding include the following:

- 1. Increase utilization of Medicaid acute care, inpatient, outpatient, and community mental health service providers (these services do not require CSA or local matching dollars);
- 2. When Residential Services are indicated, increase utilization of Medicaid funded Psychiatric Residential Treatment Facilities (Levels A, B, and C); and Therapeutic Foster Care providers. (While these services require CSA and locality matching dollars and the PRTF local match rate will increase on January 1, 2009, it is still more economical for the locality than paying with all CSA and local dollars.);
- 3. Work with the Department of Medical Assistance Services (DMAS) to determine if any of the youth currently utilizing residential treatment facility services can be discharged to the community and receive those services under the new Children's Mental Health program (these services do not require CSA and or local matching dollars);
- 4. Determine whether Medicaid eligible children require medical/mental health services outside the available Medicaid services that could be covered under the EPSDT program (these services do not require CSA or local matching dollars);
- 5. Increase utilization of Medicaid funded rehabilitative services (these services do not require CSA or local matching dollars); and
- 6. Increase utilization of Medicaid transportation to take children with Medicaid coverage to and from Medicaid reimbursed services. (These services do not require CSA or local matching dollars).

More information on each of the above is included in the table below. Please note that the services listed under option 2 are the **only** services that require a CSA local match.

## 1. Medicaid Reimbursed Mental Health Services (Do not require local CSA match)

- ❖ Outpatient Psychiatric Services: Individual therapy, family therapy, or group therapy provided by specified licensed professionals
- **❖** Acute Inpatient Psychiatric Services (psychiatric hospitalization services)
- **❖** Physicians' Services: Inpatient and outpatient therapy services
- **Community Mental Health & Substance Abuse Services:** 
  - Intensive In-home Services for Children and Adolescents
  - Therapeutic Day Treatment for Children and Adolescents
  - Mental Health Day Treatment/Partial Hospitalization Services for Adults
  - Psychosocial Rehabilitation
  - Mental Health and Substance Abuse Crisis Intervention
  - Intensive Community Treatment
  - Crisis Stabilization
  - Mental Health Support Substance Abuse Intensive Outpatient Treatment
  - Substance Abuse Day Treatment
  - Opioid Treatment
  - Residential Substance Abuse Treatment for Pregnant and Post Partum Women
  - Substance Abuse Day Treatment for Pregnant and Post Partum Women
  - Case Management for Children at Risk of Serious Emotional Disturbance, Children with Serious Emotional Disturbance, and for Adults with Serious Mental Illness
  - Substance Abuse Case Management

For further details regarding these services covered by Medicaid, refer to the following web sites: <a href="http://websrvr.dmas.virginia.gov/manuals/CMHS/cmhrs.htm">http://websrvr.dmas.virginia.gov/manuals/CMHS/cmhrs.htm</a> and <a href="http://websrvr.dmas.virginia.gov/ProviderManuals/ManualChapters/psych/chapterIV\_psy.pdf">http://websrvr.dmas.virginia.gov/ProviderManuals/ManualChapters/psych/chapterIV\_psy.pdf</a>

### 2. Medicaid Reimbursed Mental Health Services (Do require local CSA match)

While these services require CSA and locality matching dollars and the PRTF local match rate will increase on January 1, 2009, it is still more economical for the locality than paying with all CSA and local dollars.

- **\*** Treatment Foster Care Case Management
- **❖** Residential Treatment
  - Level C Treatment in a treatment facility
  - Level B Group homes licensed by DMHMRSAS
  - Level A Group homes licensed by DSS or DJJ

For further details regarding these services covered by Medicaid, refer to the following web sites:

http://websrvr.dmas.virginia.gov/ProviderManuals/ManualChapters/CMH/chapter4\_cmh.PDF and http://websrvr.dmas.virginia.gov/ProviderManuals/ManualChapters/psych/chapterIV psy.pdf

### 3. Medicaid Children's Mental Health Program Services (Do not require local CSA match)

Children who have been in a PRTF for at least 90 days, have a psychiatric diagnosis, and remain eligible for Medicaid after they leave the PRTF may be eligible for additional home and community based care services. In addition to the services listed in this memo, participants in the Children's Mental Health Program are also eligible for transition coordination services; companion services (agency and consumer-directed); respite services (agency and consumer-directed); services facilitation for consumer-directed services; environmental modifications; family/caregiver training; in-home residential support services; and therapeutic consultation. Services must be medically appropriate and necessary to maintain the client in the community.

The details for this program can be found at the following website: <a href="http://websrvr.dmas.virginia.gov/ProviderManuals/ManualChapters/CMH/chapter4\_cmh.PDF">http://websrvr.dmas.virginia.gov/ProviderManuals/ManualChapters/CMH/chapter4\_cmh.PDF</a>

# 4. Medicaid Early Periodic, Screening, Diagnosis, and Treatment (EPSDT) Services (Do not require local CSA match)

EPSDT is Medicaid's comprehensive and preventive child health program for individuals under the age of 21. The goal of EPSDT is to identify and treat health problems as early as possible. EPSDT provides examination and treatment services at no cost to the enrollee. Some of the services covered through EPSDT include:

Comprehensive Health and Developmental/Behavioral History,

Developmental Assessment and Screening,

Comprehensive Unclothed Physical Examination, Immunizations and Laboratory Tests , Laboratory Procedures,

EPSDT Requirements for Lead Testing,

Tuberculin Test (Optional), and Sexually Transmitted Disease (STD) Screening (Optional).

The brochure for EPSDT can be found at the following website:

http://www.dmas.virginia.gov/downloads/pdfs/ch-EPSDT Brch Eng 2007.pdf

More information on EPSDT can be found at the following website:

http://websrvr.dmas.virginia.gov/manuals/General/epsdt supplement gen.pdf

#### 5. Rehabilitative Services (Do not require local CSA match)

Medicaid reimbursed Rehabilitative Services include physical therapy and occupational therapy. Further information and services covered under Rehabilitative Services can be found at the following website:

http://websrvr.dmas.virginia.gov/ProviderManuals/ManualChapters/rehb/chapterIV\_reb.pdf Information regarding youth who receive these services through their IEP is included in the School Division Manual at the following website:

http://websrvr.dmas.virginia.gov/ProviderManuals/ManualChapters/sd/chapterIV\_sd.pdf

### **6.** Medicaid Transportation (Does Not Require CSA or Local Match)

Medicaid transportation can be utilized to take children with Medicaid coverage to and from Medicaid reimbursed services, such as counseling, doctor's appointments, and day treatment. A responsible adult must accompany the child to and from the appointment. To arrange transportation, call 1-866-386-8331. The call must be made at least 5 business days prior to the scheduled medical appointment. Enrollees in a Managed Care Organization (MCO) should call the transportation number provided by the MCO.

Medicaid Eligibility It is important to note that a child living in the community will be treated differently in terms of Medicaid eligibility than a child who has been living in a residential setting for 30 days or more. In the community, the child's eligibility is determined by the family income; in the residential setting for 30 days or more, the child is considered a "family of one" for purposes of Medicaid eligibility. This can be especially valuable if the youth is already in a Medicaid certified facility for treatment. (VDSS Volume XIII M0520.001 B. Policy 3. Living Away from Home states: Children placed in psychiatric residential treatment facilities are considered absent from their home if their stay in the facility has been 30 days or more. A child who is placed in a psychiatric residential treatment facility is considered NOT living with his parents for Medicaid eligibility purposes as of the first day of the month in which the 30<sup>th</sup> day of a psychiatric residential placement occurs. Long-term care rules do not apply to these children.)

### **Medicaid Training for CSA**

Information on Medicaid reimbursed mental health services can be found on the DMAS website at http://www.dmas.virginia.gov/ln-mental health services.htm.